## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10699219

|  |  |   |                      | ·                               | <del></del>         |                  |        |                    |                        |                |                     |                        |
|--|--|---|----------------------|---------------------------------|---------------------|------------------|--------|--------------------|------------------------|----------------|---------------------|------------------------|
|  |  | CLAIMS AS                                 | S FILED -<br>(Column |                                 | (Column 2)          |                  |        | SMALL ENTITY TYPE  |                        | OR             | OTHER<br>SMALL      |                        |
| TOTAL CLAIMS                               |  |   | 34.                  |                                 |                     |                  | Γ      | RATE               | FEE                    | 1              | RATE                | FEE                    |
| FOR  |  |   | NUMBER FILED         |                                 | NUMBER EXTRA        |                  |        | BASIC FEE          | 385.00                 | OR             | BASIC FEE           | 770.00                 |
| TOTAL CHARGEABLE CLAIMS                    |  |   | 3 ← minus 20=        |                                 | * 14                |                  |        | X\$ 9=             |                        | OR             | X\$18=              | 252                    |
| INDEPENDENT CLAIMS                         |  |   | ) mi                 | nus 3 =                         | * Ø                 |                  |        | X43=               |                        | OR             | X86=                |                        |
| ML   | ILTIPLE DEPEN  | DENT CLAIM P                              | RESENT               |                                 | 7                   |                  | Ì      | +145=              |                        | OR             | +290=               |                        |
| * If the difference in column 1 is less th |  |   |                      | an zero, enter "0" in column 2  |                     |                  | L      | TOTAL              |                        | OR             | TOTAL               | 1024                   |
|  | 7-5-07   | LAIMS AS A                                |                      | - PART II (Column 2) (Column 3) |                     |                  | SMALL  | ENTITY             | OR                     | OTHER<br>SMALL | THAN                |                        |
| NTA  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                      | HIGH<br>NUMI<br>PREVIO<br>PAID  | BER<br>DUSLY        | PRESENT<br>EXTRA |        | RATE               | ADDI-<br>TIONAL<br>FEE |                | RATE                | ADDI-<br>TIONAL<br>FEE |
| <b>AMENDMENT A</b>                         | Total  | . 33                                      | Minus                | <del>ر</del>                    | 7                   | = \              |        | X\$ 9=             |                        | OR             | X\$18=              |                        |
|  | Independent  | · 3                                       | Minus                | ***                             | 3                   | =                |        | X43=               |                        | OR             | X86=                |                        |
| _  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                      |                                 |                     |                  |        | +145=              | ·. ·                   | OR             | +290=               |                        |
|  |  |   |                      |                                 |                     |                  |        | TOTAL              |                        | OR             | TOTAL<br>ADDIT, FEE |                        |
| (Column 1) (Column 2) (Column 3)           |  |   |                      |                                 |                     |                  |        |                    |                        |                | ,                   |                        |
| AMENDMENT B                                | ·  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                      | HIGH<br>NUMI<br>PREVIO<br>PAID  | EST<br>BER<br>DUSLY | PRESENT<br>EXTRA |        | RATE               | ADDI-<br>TIONAL<br>FEE |                | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total .  | *   | Minus                | **                              |                     | =                |        | X\$ 9=             |                        | OR             | X\$18=              |                        |
| AME  | Independent  | *   | Minus                | ***                             |                     | =                |        | X43=               |                        | OR             | X86=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                      |                                 |                     |                  |        | +145=              |                        | OR             | +290=               |                        |
|  |  |   |                      |                                 |                     |                  | L<br>A | TOTAL<br>DDIT. FEE |                        | OR             | TOTAL<br>ADDIT. FEE |                        |
| (Column 1) (Column 2) (Column 3)           |  |   |                      |                                 |                     |                  |        |                    |                        |                |                     |                        |
| AMENDMENT C                                |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | ·                    | HIGH<br>NUMI<br>PREVIO<br>PAID  | BER<br>DUSLY        | PRESENT<br>EXTRA |        | RATE               | ADDI-<br>TIONAL<br>FEE |                | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total ·  | *   | Minus                | **                              |                     | = .              | lΓ     | X\$ 9=             |                        | OR             | X\$18=              |                        |
| ME   | Independent  | *   | Minus                | ***                             |                     | =                |        | X43=               |                        | OR             | X86=                |                        |
| L  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                      |                                 |                     |                  |        | +145=              |                        |                | .000                |                        |
| •  | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |   |                      |                                 |                     |                  |        |                    |                        | OR             | +290=               |                        |
| **   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |   |                      |                                 |                     |                  |        |                    |                        |                |                     |                        |